

**DEPARTMENT OF HEALTH AND HUMAN SERVICES
FOOD AND DRUG ADMINISTRATION
INVOICE FOR FREEDOM OF INFORMATION REQUEST**

1. Invoice Number

07201900010

2. Date

08/12/2019

3. REQUEST RECEIVED FROM

ANTHONY ROBERTS
MUCKROCK NEWS DEPT MR 59820
411A HIGHLAND AVE
SOMERVILLE, MA 02144
USA
617-299-1832

4. COMMENTS

FIRM CHARGES FOR THE MONTH OF JULY 2019

5.

BILLING INFORMATION

Attach Check or Money Order Here	Item	Amount
	a.Reproduction	\$ 0.00
	b. Search Time	\$ 28.75
	c. Review Time	\$ 0.00
	d. Microfiche	\$ 0.00
	e. Other	\$ 0.00
MAKE CHECKS PAYABLE TO: FOOD AND DRUG ADMINISTRATION		Total \$ 28.75

Payment can be forwarded to FDA by one of the following methods:

1. Online Payment:

The preferred payment method is online using electronic check (Automated Clearing House(ACH) also known as eCheck) or credit card. Make an online payment at <https://userfees.fda.gov/pay>.
ALL PAYMENTS MUST BE MADE WITH US CURRENCY
For more help, see the 'Step-By-Step Instructions.'

2. If checks are sent by U.S. Mail, send to:

Food and Drug Administration
P.O Box 979107
St. Louis, MO 63197-9000

3. If checks are to be sent by a courier that requires a street address, the courier can deliver the checks to:

U.S.Bank
ATTN: Government Lockbox 979107
1005 Convention Plaza
St. Louis, MO 63101

Note: This address is for courier delivery only. Contact the U.S. Bank at 314-418-4013 if you have any questions concerning courier delivery

6. FOI CONTACT

Shera Behram

7. TELEPHONE (Include Area Code)

301-796-8983

Requester Name: ANTHONY ROBERTS

Control	Signature	Action	Repro	Search	Review	Fiche	Other	Total Fees	Total Paid
2018-6917	Anthony Roberts	07/18/2019	\$ 0.00	\$ 28.75	\$ 0.00	\$ 0.00	\$ 0.00	\$ 28.75	\$ 0.00
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Please return this page with your remittance.

Invoice #: **07201900010**

Invoice Amount: **\$ 28.75**

Payment may also be made by wire transfer of funds. The following account identifying information is provided for firms who prefer to wire user fee payments:

FDA Deposit Account Number: 75060099

NY Federal Reserve Bank's routing/transit number: 021030004

Reference: Cite the invoice number

To expedite this process, please review this invoice carefully. If there are any discrepancies, please contact Shera Behram. FOA/FOI/HFI-35, telephone number 301-796-8983. Thank you for your cooperation and expeditious payment of invoice.

Note: Payment is due within 30 days after receipt of this invoice. Failure to submit payment may jeopardize processing of future requests.

Notice to Customers Making Payment by Personal Check

If you send us a personal check, it will be converted into an electronic funds transfer (EFT). This means we will copy your check and use the account information on it to electronically debit your account for the amount of the check. The debit from your account will usually occur within 24 hours, and will be shown on your regular account statement.

You will not receive your original check back. We will destroy your original check, but we will keep the copy of it. If the EFT cannot be processed for technical reasons, you authorize us to process the copy in place of your original check. If the EFT cannot be completed because of insufficient funds, we may try to make the transfer up to 2 times.